FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000048449 (0)

LLAL	EVDODT	9. IMPODT	CORPORATION
U.N.	EXPURI	& IMPURE	CURPURATION

Principal Place of Business Mailing Address 7476 REPUBLIC DRIVE 7476 REPUBLIC DRIVE ORLANDO FL 32819 ORLANDO FL 32819



					3. Date Incorporated or Qualified 06/27/1994	3a. Date of Last Report 05/01/1995
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 59-3253313	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required		
Crty & State		City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Z _I p	Country 25	Ζφ 29	Country 30		This corporation has liability for Florida Statutes	intangible tax under s 199.032, ☐ No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New F	legistered Agent
			81	Name		
	, armando u Ripley court		82	Street Addr	ress (P.O. Box Number is Not Acceptab	ole)
	NDO FL 32836		83			
			84	City		FL 85 Zip Code
	th, and accept the obligations of, Se Signature typed or proted name of registron Lay OFFICERS A		DIE Registered Age	nt synatoré respone	sowher resistating)* ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1 1 TITLE			☐ Change ☐ Addition
NAME	FILHO, ARMANDO U	_	1.2 NAME			
STREET ADDRESS	7311 RIPLEY COURT		13 STREE	ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32836		1.4 CHTY-1			
TITLE	VSD	DELETÉ	2 1 TITLE			Change Addition
NAME	NAHMENS, FABIO R		2.2 NAME			
STREET ADDRESS	9436 DANEY STREET		2 3 STREE	T ADDRESS		
CITY-ST-7/P	GOTHA FL 34734		2 4 C(TY -	ST-ZIP		
TITLE	TD	☐ DELETE	3 1 TITLE			☐ Change ☐ Addition
NAME	URSU, EDNA F		3.2 NAME			
STREET ADDRESS	7311 RIPLEY COURT		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32838		3.4 CITY-			
TITLE		☐ DELETE	4 1 11TLE	1		Change Addition
NAME			4.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		F3 ports	4 4 CITY -			☐ Change ☐ Addition
TITLE		DELETE	5 1 THILE			Change Addition
NAME	1		5 2 NAME			

6 4 C*1Y - S1 - ZIF 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with eq address.

5 3 STREET ADDRESS

54 CITY - ST - ZIP

6 1 TITLE

6.2 NAME 63 STREET ADDRESS

SIGNATURE: **★**

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIF

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

3/14/96 407-351-4759

☐ Change

Addition

CR2E034 (12/95)